

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HH2		11-16-01
O.I.P.E. CLASSIFIER			11-29-01
FORMALITY REVIEW	FR	1018	11-28-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
= ..... Allowed  
- (Through numeral) ... Canceled  
+ ..... Restricted

N ..... Non-elected  
I ..... Interference  
A ..... Appeal  
O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
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Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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